PTO/SB/05 (06-03) Approved for use through 07/31/2003. OMB 0651-0032

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			Atto	rney Docket	No.	PC25578A							
- a UTILITY				)		<del>                                     </del>							
PATENT APPLICATION				Firs	t Inventor		Katharine Helen BANNER						
TRANSMITTAL				Title	•		ANIMAL MODEL FOR INFLAMMATORY BOWEL DISEASE						
(Only for new nonapplications under 37C.F.R. §1.53(b))				Ехр	ress Mail Lai	bel No.	EV 271824085 US						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					ADDRESS	p <u>Patent Application</u> sioner for Patents ) ria, VA 22313-1450	PTO 23						
1.	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)  Applicant claims small entity status			7. 8.	com	puter Pro and/or A	cate, large table or						
3.	See 37 CFR 1.27  Specification	1			a	ole Copy (CRF)	19,						
<b>.</b>	(preferred arrangen - Descriptive title - Cross Referenc - Statement Regal	(preferred arrangement set forth below)  - Descriptive title of the Invention  - Cross References to Related Applications  - Statement Regarding Fed sponsored R&D  - Reference to sequence listing, a table, or a computer program listing appendix					b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies)  ii. Paper  c. Statement verifying identity of above copies						
	- Background of t	the Invention			ACCOMPANYING APPLICATION PARTS								
	<ul> <li>Brief Summary of the Invention</li> <li>Brief Description of the Drawings (if filed)</li> </ul>			9.	Assi	ignment P	apers (cove	r sheet & document(s))					
	Detailed Description     Claim(s)     Abstract of the Disclosure			10.	10. 37 CFR 3.73(b) Statement Power of Atto (when there is an assignee)								
	- Austract of the t	Disclosule		11.	Eng	lish Trans	lation Docum	nent ( <i>if applicable</i> )					
4.	Drawing(s) (35 U.S.	S.C. 113) [Total shee	ts <u>3</u> ]	12.		rmation Di ement (ID	isclosure S)/PTO-144	Copies of IDS Citations	6				
5.	Oath or Declaration	Oath or Declaration [Total pages ]		13.	Prel	Preliminary Amendment							
	a. Newly executed (original or copy)			14.		Return Receipt Postcard (MPEP 503) (Should be specifically itemized)							
	b. Copy from a prior application (37 CFR §1.63(d))  (for continuation/divisional with Box 18 completed)			15.	5. Certified Copy of Priority Document(s)								
	Signed sta named in t	DELETION OF INVENTED ATTEMPT A	ng inventor(s)	16.	Non (b)(2	publicatio	n Request u oplicant mus	ed) (UK 0303085.5) nder 35 U.S.C. 122 t attach form PTO/SB/35					
6	6 Application Data Sheet. See 37 CFR 1.76		17.	Othe									
18.	If a CONTINUING APPL or in an Application Data Sh	LICATION, check app heet under 37CFR 1.76	propriate box, and s	upply th	ne requisite info	ormation be	elow and in a p	oreliminary amendment,					
	Continuation Divisional Continuation-in-part (CIP) of prior application No:/												
Prior application information: Examiner Group/Art Unit:													
For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts													
19. CORRESPONDENCE ADDRESS													
	Customer Number 2	28523		OI	Corres	oondence address below							
Name													
	Address		1			I							
City		State					Zip Code						
Coun	Country   Telephone   Fax    NAME (Print/type)   Christine S. Lee   Registration No. (Attorney/Agent)   42,788						12 789	$\dashv$					
l			Thee	riegis	STATION NO.	Date	ngerii)	42,788 February <i>9</i> ,2004	$\dashv$				

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patentank Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

	C mplete if Kn wn								
FEE TRANSMITTAL	Application Number To Be Assigned								
for FY 2004	Filing Date He				Here	erewith			
	First Named Inventor Ka				Katl	atharine Helen BANNER			
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name To				ToE	o Be Assigned			
Applicant claims small status. See 37 CFR 1.27						o Be Assigned			
Total Amount of Payment \$1,408.00	Attorney Docket Number PC25578A								
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
☐ Check ☐ Credit Card ☐ Money ☐ Other ☐ None Order	3. ADDITIONAL FEES Large Entity Small Entity								
Deposit Account:	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description			Fee Paid	
Deposit Account	1051	130	2051	65	Surcharge – late fee or oath				
Number Deposit Account Name	1052	50	2052	25	Surcharge-				
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification				
☐ Charge fee(s) indicated below ☐ Credit any overpayments	1812	2,520	1812	2,520	For fling a request for Ex Parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action				
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month				
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month				
Large Entity Small Entity	1253	950	2253	475	Extension t	for reply within third	month		
Fee Fee Fee	1254	1,480	2254	740	Extension f	for reply within fourt	th month		
Code (\$) Code (\$) Fee Description Fee Paid	1055	0.010	2055	1 005	 	ior roots sithin fifth .			
1001 770 2001 385 Utility filing fee <b>770</b>	1255	2,010	2255	1,005		for reply within fifth i	monun		
1002 340 2002 170 Design filing fee 1003 530 2203 265 Plant filing fee	1401 1402	330 330	2401 2402	165 165	Notice of A	ppear ef in support of an a	nneal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145		r oral hearing	.ppou.	-	
1005 160 2005 80 filing fee	1451	1,510	1451	1,510		institute a public use prod	ceedina		
	1452	110	2452	55	ı	revive unavoidable			
Subtotal (1)s \$ 770	1453	1,330	2453	665	Petition to revive – unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Litility issue	e fee (or reissue)			
Extra Claims Fee from Fee Paid	1502	480	2502	240	Design issue fee				
below     Total Claims   25   - 20** =   5   x   18   =   90.00	1503	640	2503	320	Plant issue	fee	·		
Independent 6 - 3 = 3 x 86 = 258.00	1460	130	1460	130	Petitions to	the Commissioner			
Claims 290. 290.00	1807	50	1807	50	Processing	fee under 37 CFR	1 17/0\		
Multiple Dependent	1806	180	1806	180	1	n of Information Disclosu	` "		
Large Entity Small Entity		,		. 50					
Fee Fee Fee Fee Fee Code (\$) Code (\$)	8021	40	8021	40		each patent assigni			
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385		mes number of prop omission after final r			
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each a	dditional invention to (37 CFR 1.129(b))	to be		
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385		r Continued Examination	n(ROE)		
1204 86 2204 43 **Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination of a design application				
1205 18 2205 9 **Reissue independent claims over original patent  (\$) 638.00	Other F	ee (specify)	· ·		-				
**or number previously paid, if greater; For Reissues, see above	*Baduc	ed by Basic	Filing 5	ee Poid	e.	ubtotal (3)	(\$)		
SUBMITTED BY	neuuce	o by basic	ining F			applicable)	] (4)		
Name (Printed/Type) Christine S. Lee		tration No. ney Agent			1,2.0.0 #		(860)686-	0348	
Signature Cluster Dale	1 (7110)	2-/9					<u>.</u>		

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